Statement of Contributions Received

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Prescribed by Secretary of State 03/05

Name of Committee in Full Greenhill for City Council								
Full Name of Contributor Link R. Murphy			Registra	ution Nur	mber, if Pa	AC .		
Street Address 2400 Wenbury Rd.	Employer/Occu	pation/Labor Organization*	<u> </u>		- '	Form (Cash, Check, etc.) Check		
City Columbus	State OH	Zip Code 43220	0 ^M 7	1 3	1 3	Amount \$50.00		
Full Name of Contributor Linda G. Readey			Registra	ition Nui	nber, if Pa	AC		
Street Address 3033 Loire Lane	Employer/Occup 43221	Employer/Occupation/Labor Organization 43221						
City Columbus	State	Zip Code	0 ^M ,7	1 3	1 3	Amount \$25.00		
Full Name of Contributor Steven F. Sheckell					Registration Number, if PAC			
Street Address 939 Yarmouth	Employer/Occup	Employer/Occupation/Labor Organization				Form (Cash, Check, etc.) Check		
City Bloomfield	State MI	Zip Code 48301	0 7	1 3	1 3	Amount \$250.00		
Full Name of Contributor Ronald J. Bloomfield				ition Num	nber, if Pa	_		
Street Address 2323 Brandon Rd		pation/Labor Organization*				Form (Cash, Check, etc.) Check		
City Columbus	State OH	Zip Code 43221	0 ^M 7	D 1 3	1 3	Amount \$250.00		
Full Name of Contributor			Registra	ition Nun	nber, if PA	AC		
Street Address	Employer/Occup	Employer/Occupation/Labor Organization*			Form (Cash, Clieck, etc.)			
City	State OH	Zip Code	M	D	Y	Amount		
Full Name of Contributor					Registration Number, if PAC			
Street Address	Employer/Occup	oloyer/Occupation/Labor Organization*				Form (Cash, Check, etc.)		
City	State OH	Zip Code	M	D	Y	Amount		
Full Name of Contributor Registration Number, i					nber, if PA	AC		
Street Address	Employer/Occur	Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.)		
City	State OH	Zip Code	M	D	Y	Amount		
Full Name of Contributor Registration Number, if					nber, if P/	AC		
Street Address	Employer/Occup	Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.)			
City	State OH	Zip Code	M	D	Y	Amount		

Page Total \$575.00

Required for contributions from individuals over \$100 to statewide and general assembly candidates. If contributor is self-employed, the occupation and the name of the individual's business, if any, rather than employer should be listed. If two or more employees contribute via payroll deduction and exceed the aggregate of \$100, the labor organization of which the employees are members, if any, must also appear. [R.C. 3517.10(B)(4)]